

**PATENT APPLICATION FEE DETERMINATION RECORD**

Effective October 1, 2000

Application or Docket Number

**CLAIMS AS FILED - PART I**

(Column 1) (Column 2)

TOTAL CLAIMS	<i>33</i>	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	<i>33 minus 20 =</i>	<i>13</i>
INDEPENDENT CLAIMS	<i>10 minus 3 =</i>	<i>7</i>
MULTIPLE DEPENDENT CLAIM PRESENT		<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

**CLAIMS AS AMENDED - PART II**

(Column 1) (Column 2) (Column 3)

AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	<i>32</i>	Minus	<i>** 33</i>
Independent	<i>* 10</i>	Minus	<i>*** 10</i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	<i>*</i>	Minus	<i>**</i>
Independent	<i>*</i>	Minus	<i>***</i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
	Total	<i>*</i>	Minus	<i>**</i>
Independent	<i>*</i>	Minus	<i>***</i>	=
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM				

**SMALL ENTITY  
TYPE**

**OTHER THAN  
OR SMALL ENTITY**

RATE	Fee
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	Fee
BASIC FEE	710.00
X\$18=	<i>234</i>
X80=	<i>560</i>
+270=	
TOTAL	<i>1504</i>

**SMALL ENTITY**

**OTHER THAN  
SMALL ENTITY**

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL ADDT. FEE	

RATE	ADDI- TIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL ADDT. FEE	

\* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

\*\* If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."

\*\*\*If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This Form is for INTERNAL PTO USE ONLY  
It does NOT get mailed to the applicant.

## NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: \_\_\_\_\_

### Total Fee Calculation

Fee Code	Total # Claims	Number Extra	X	Fee	Fee
Sm./Lg.				Sm. Entity	Lg. Entity
Basic Filing Fee	<u>201/101</u>				<u>710</u>
Total Claims >20	<u>203/103</u>	<u>33</u>	-20 = <u>13</u>	X	<u>234</u>
Independent Claims >3	<u>202/102</u>	<u>10</u>	-3 = <u>7</u>	X	<u>560</u>
Mult. Dep Claim Present	<u>204/104</u>				<u>130</u>
Surcharge	<u>205/105</u>				
English Translation	<u>139</u>				<u>1634</u>

### TOTAL FEE CALCULATION

Fees due upon filing the application:

Total Filing Fees Due = \$ 1634.

Less Filing Fees Submitted - \$ \_\_\_\_\_

BALANCE DUE = \$ 1634